

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 21 | 11/16/01 |
| FORMALITY REVIEW | AM | 917 | 03-12-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|-------|------|
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
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| 6 | ✓ |
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| Claim | Date |
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| Claim | Date |
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| 146 | ✓ |
| 147 | ✓ |
| 148 | ✓ |
| 149 | ✓ |
| 150 | ✓ |

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)